

The author, Sacha Guitry, had long cherished the thought of an acted picture of Pasteur's life. But, what if it should prove a profanation, a sacrilege? The author hesitated; he dared not put on the stage the worshiped master, who had almost just left our midst. Vallery-Radot, Pasteur's son-in-law, had published a splendid biography of the great scientist. Sacha Guitry devoured it,—his imagination was at work before his reason gave consent. At last, one day, Lucien Guitry, the great actor, father of Sacha, asked his son to write a part for him. It was then that "Pasteur" stood before him—no longer on the pedestal of his own statue—but on the great platform called "The Stage."

How reverently and adoringly Sacha Guitry handled his "subject." How careful he was not to betray any of Pasteur's admirable qualities, his modesty, his firmness, his honesty, his generosity. No incident, no episode foreign to this most beautiful life, has any place in this "work of love,"—as one might well call it.

Sacha Guitry has accomplished with no other aid but Pasteur's biography and his own dramatic genius, what is usually only attained with much fiction. He has made a wonderful play out of a few well chosen pages of a remarkable life.

The play is divided into five rather short acts, relating to five different periods of Pasteur's career.

The first act takes place in 1870. It is a mere introduction, showing Pasteur's relations with his pupils. The second act (1880) represents the Academy of Medicine. There we are shown the great man in all his wonderful activity and strength, defending his ideas and discoveries against a few skeptics and detractors.

How forcibly we are given an insight into this splendid character, so gentle, so mild, except when unjustly treated! When once sure of his theories, when once illumined by the light of truth, he violently defends his discoveries and convictions. In the third act (year 1885) Pasteur is seen ministering his care to a child dangerously ill, threatened with hydrophobia. For the first time Pasteur applies his treatment, and with what care and what love for the little victim. At the end of the act, Pasteur prepares to leave his little patient in

the hands of his assistant; he puts on his hat and coat, giving the doctor his last instructions. Then, after a pause, he takes off hat and coat, and decides to spend the night at the bedside of the little sick child. "Go," he tells one of his pupils, "go to Mme. Pasteur; tell her what has happened; she will excuse me; she will understand why I spend the night here."

The fourth act (in 1888) takes place at Arbois, Pasteur's home. The great man is failing in health, and is being eagerly watched by his anxious wife and doctor. A visit fills him with joy,—that of the child, whose life he had saved. How exquisitely Sacha Guitry has shown here the love of Pasteur for children. When the young boy assures him of his good health, and exhibits the prize he has received at school; when the child tells him his mother said "Pasteur saved his life," the master with a cry of joy exclaims: "Oh, how beautiful these words sound coming from this little mouth. He does not know, he does not understand what he is now doing for me. Show me your beautiful, living eyes, look at me." It is most touching, most perfect in depth of feeling.

The last act (1892) is "at the Sorbonne." This short act is a sort of apotheosis of Pasteur. President Carnot comes in person to present to him the Cross of the Legion of Honor, and the play ends with Pasteur's own words, "I unflinchingly believe, that science and peace will triumph over ignorance and war, and that people will understand each other and agree not to destroy, but to edify."

This beautiful play in which not one woman appears, has been received with much enthusiasm. To add to its success, the part of Pasteur was done most wonderfully by the great artist Lucien Guitry, father of the author.

It seems that he conceived the part with such truth, such realism—and, through his extraordinary art achieved such a perfect resemblance to his great model, that Mrs. Vallery-Radot, Pasteur's daughter, as she saw him appear on the stage—startled,—cried out: "Father!"

Let us congratulate both "Guitrys" for having thus almost resurrected in mind and body the great man whose work will be immortal.

The San Francisco Hospital

By WILLIAM C. HASSLER, Health Officer.

Foreword.

While this paper is intended to be descriptive of the magnificent group of buildings now comprising the San Francisco Hospital, it is deemed that a brief history of the old buildings, formerly known as the "City and County Hospital," would properly be in order first.

The Old City and County Hospital.

The original hospital was erected in the year 1872, the contract price being \$134,400. Additional ward and operating rooms and a retaining bulkhead were built in 1877, at a cost of \$20,000, bringing the initial cost to \$154,000. It would be difficult at this time to estimate the amount of money expended for alterations, additions and repairs between 1877 and 1908 (when these buildings were destroyed), but it is fair to assume that it would run into tens of thousands of dollars.

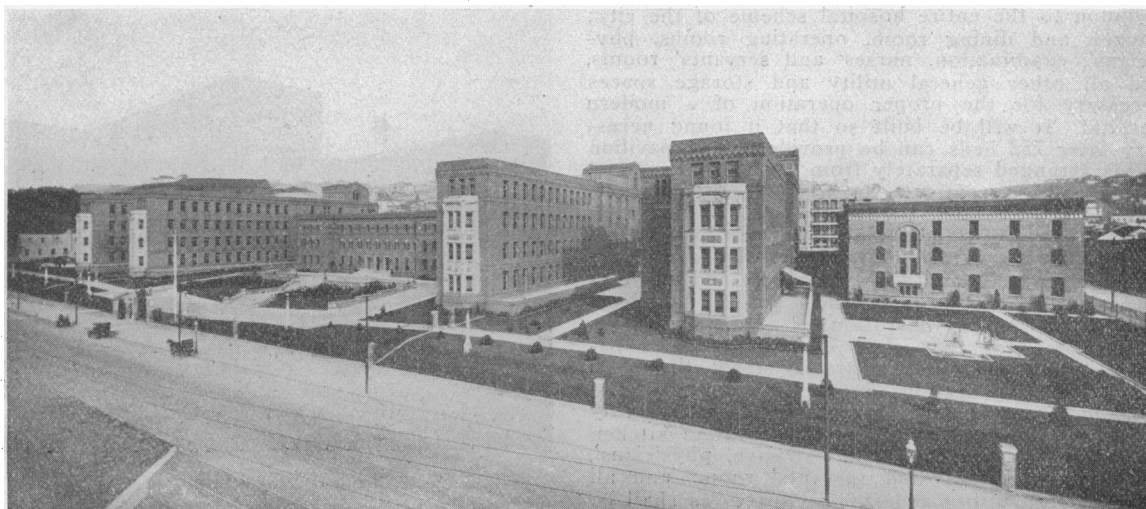
The buildings in question consisted of a group of sixteen structures, located on Potrero avenue running from Twenty-second to Twenty-third streets and extending back to San Bruno avenue, the size of the lot being 866 by 480 feet, or a square city block of dimensions above the average.

For purposes of comparison with the new group a general description of the old hospital would seem proper, the following data culled from an ancient report being quoted:

"Administrative building, central portion 69½

by 44½ feet with two wings, each 68½ by 21½ feet, and rear extension 26 by 17 feet; frame, two stories and attic, with brick basement. Dining hall, 76½ by 51¾ feet, minus the open court 24 feet square; frame, two stories and brick basement. Kitchen, 50 by 35 feet; brick, one story with Mansard roof. Larder and scullery, 35 by 18 feet; frame, one story. Outdoor closets, 35 by 12 feet; frame, one story. Six ward pavilions, each 156 by 26 feet; with flanking wings at both front corners, 13½ feet square; frame, two stories. One operating and one dressing room, each 25 by 17 feet; frame, one story. Chapel, 50 by 30 feet with library 18 by 14 feet; frame, one story, with Gothic roof. Main connecting corridor, 556 by 19 feet; frame, one story. Laundry, 63 by 43 feet; brick, one story and basement. Stable, 44 by 24 feet; frame, two stories. Morgue, 44 by 18 feet; frame, one story."

In 1872 the foregoing described hospital was doubtless considered as a wonderful institution, and perhaps it was, but as time went on it naturally began to outgrow its usefulness as the city grew and expanded, and for many years prior to the construction of the now existing buildings the old hospital proved to be woefully antiquated and inadequate, and many unsuccessful attempts were made from time to time to secure a new group of buildings in their stead. The reports of various health officers in San Francisco for many years prior to 1908 always dwelt very strongly on the wretched condition existing in the old institution and were constantly urging the necessity of mod-



General View of Buildings

ern buildings to properly handle the city's indigent sick.

Up to 1907, however, all efforts and recommendations along these lines were without result, as a policy of repair and extension of the existing buildings seemed to prevail rather than the idea of erecting new structures, but in August of that year the issue was presented when bubonic plague made its appearance in the city, and it was discovered that the City and County Hospital was a focus of infection for this disease. On August 28, 1907, the hospital was placed under quarantine by the Board of Health acting in conjunction with the United States Public Health Service.

Various plans were devised and schemes pursued to thoroughly disinfect the old buildings but without avail, as it appeared that proper disinfection or fumigation could not obtain owing to the rambling character of what might now be properly termed old and dilapidated shacks, composing as they did a conglomerate mass of wings and attachments apparently put up from time to time in more or less of a haphazard fashion.

On September 2, 1907, a resolution was adopted by the Board of Health directing the removal of patients in the City and County Hospital to a suitable quarantine station to be followed immediately by a destruction by fire of the existing structures. It appears that no immediate action was taken on this resolution for the reason that certain elements in the community could not be convinced that a real danger existed. On September 17, 1907, another resolution was adopted condemning the buildings as a public nuisance and ordering that they be evacuated as rapidly as possible. The terms of this last resolution were promptly carried into effect, and on October 14, 1907, it was reported that all cases had been transferred to the Relief Corporation Camp at Ingleside and to No. 2 building on the Alms-house tract, the former handling all acute and the latter receiving all chronic cases. By resolution No. 1847 January 22, 1908, the Board of Supervisors requested the Board of Public Works to formulate and report a plan to the Board for the absolute destruction of the City and County Hospital buildings and its material, and on March 3, 1908, the Board of Supervisors authorized the sum of \$3500 to be expended by the Board of Public Works for the purpose of tearing down and absolutely destroying the buildings comprising the City and County Hospital on Potrero avenue near Twenty-second street, and said buildings were destroyed by fire in June, 1908, as being insanitary. This marked the passing of the old

City and County Hospital, and we will now proceed with a description and history of the present San Francisco Hospital.

The New San Francisco Hospital.

On March 30, 1908, the Board of Supervisors of the City and County of San Francisco passed Ordinance No. 404 (New Series) calling for a special election for the purpose of submitting propositions to incur a bonded indebtedness for several different propositions, one of which was specified and set forth in said ordinance as follows:

"For the construction of permanent municipal buildings to be used for the purpose of public hospitals and the acquisition of lands necessary therefor."

At this special election, which was held on May 11, 1908, the proposition to incur a bonded indebtedness for such purpose in the sum of \$2,000,000 was carried. Previously (in 1903) a bond issue of \$1,000,000 had been carried for the erection of a hospital which provided for the construction of the buildings on the Alms-house site, but this plan was subsequently changed and the sum of \$250,000 of this issue was expended in the construction of an Infirmary on said tract, the intention being to use it temporarily for hospital purposes so far as its capacity would admit, to be later used for chronic cases or as an adjunct to the Relief Home. This building subsequently became what was known as the temporary City and County Hospital while the new group was under construction, and was used as such until May 1, 1915, when the new San Francisco Hospital was formally opened for the reception of patients.

With the proceeds derived from the sale of Hospital bonds of May 11, 1908, the Board of Supervisors declared it the intention of the City and County of San Francisco to have a Class A thoroughly fire and earthquake proof group of buildings to be constructed on the present site, and an additional lot of land to be acquired by the city and county in proximity to the old site. All of this additional land, most of which was occupied by dwellers, was acquired in due course of time and the hospital compound thus comprised two square city blocks.

The Board of Supervisors at this time declared "that said group of buildings were to be composed of a main building for acute and surgical cases, a group of pavilions for tuberculous patients and a group of pavilions for mild infectious cases."

The main building was to be a four-story structure with accommodations for 512 beds. "Said building to contain all administrative offices

common to the entire hospital scheme of the city; kitchen and dining room, operating rooms, physicians', examination, nurses' and servants' rooms, and all other general utility and storage spaces necessary for the proper operation of a modern hospital. It will be built so that if found necessary later 752 beds can be provided. The pavilion wards arranged separately from the main structure, for tuberculous patients, to have accommodations for 250 beds.

"Said group of buildings shall contain kitchen and dining rooms, such administrative, physicians', examination, nurses' and servants' rooms and all other general utility and storage spaces as shall be necessary to the proper operation of a modern hospital intended for that class of patients. The pavilion wards arranged separately from the main and tuberculosis sections for the treatment of mild infectious cases to have accommodations for fifty beds, said group of buildings shall contain kitchen and dining room, such administrative, physicians', examination, nurses' and servants' rooms and all other general utility and storage spaces as shall be necessary to the proper operation of a modern hospital."

Saturday, November 20, 1909, when the corner stone of the San Francisco Hospital was laid with fitting ceremonies, marked the beginning of an epoch in the history of the Health Department and in San Francisco that had long and earnestly been waited for, and from that date on, barring several unavoidable delays, work progressed fairly rapidly towards the completion of this immense group of buildings. Some idea of their magnitude may be gained when we state that the facade of the main group covers a space of between 800 and 850 feet in length, the exact size of the entire compound being given as 866 feet in length by 760 feet in depth.

The then city architect, Newton J. Tharp (since deceased), who designed the buildings, chose the old site for the location of the general hospital so as to be able to place the infectious disease building on the high ground at the northeast corner of the compound and the tuberculosis hospital at the southwest corner where the patients would have the advantage of air and sunlight. The Italian Renaissance style of architecture was followed by the designer of the buildings which are of brick of rich color with terra cotta trimmings. The grounds have since been laid out with green lawns and bright flowering plants to add to the attractiveness of the structure.

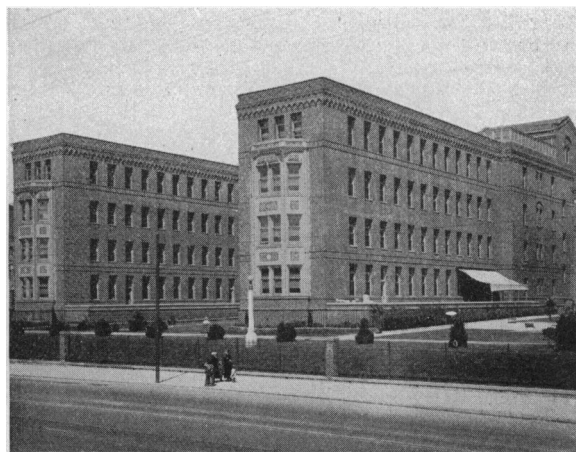
On the first day of May, 1915, the main group was declared completed and ready for occupancy, the Health Department taking formal possession, and proceeded to remove patients from the Infirmary building on the Relief Home tract to the new institution.

In 1917 it became apparent that the original bond issue of \$2,000,000 would not be sufficient to carry out the completion of the building and equipping of the tuberculosis wing, contagious pavilion and pathological building, and a further bond issue of \$1,700,000 was unanimously voted by the people under the designation of "Hospital-Jail Completion Bonds," and of this amount approximately \$1,500,000 was devoted to hospital purposes. Thus the entire group as it stands today represents an investment of \$3,500,000, the gift of a generous people to suffering humanity.

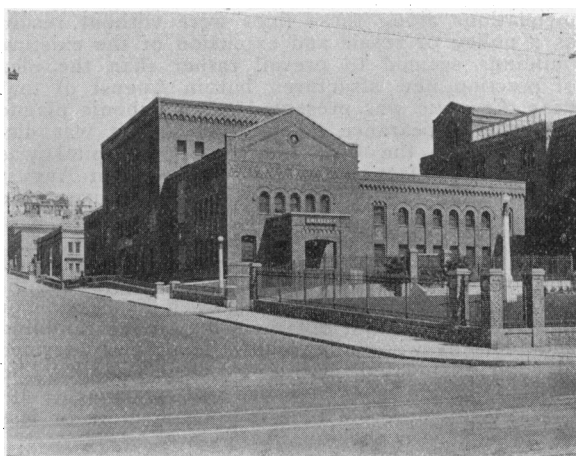
I.

Description of Buildings—Main Group.

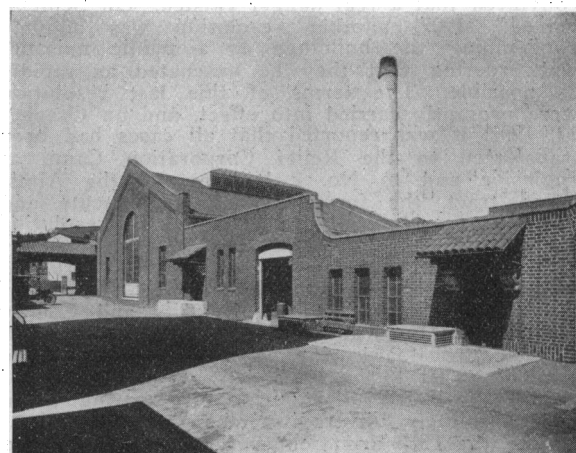
The general hospital is four stories high and has room for 512 beds. It is so constructed that if later it is found necessary, the capacity can be enlarged to 752 beds. The main entrance to the hospital is in the center of the Potrero avenue frontage and persons entering or leaving the building are obliged to pass attendants who are on duty day and night. To the east and in the rear of the office



Typical Ward Building



View of Receiving Building and Emergency Hospital



View of Power Plant, Laundry, and connecting passage to Contagious Ward

there is an imposing courtyard leading to the administration building, at the sides of which are the several wards. These wards run east and west and are connected with the administration building by a wide corridor which extends the entire length of the site and unites all of the structures.

The main ward buildings are divided into thirty bed units, with twenty-six in a ward, 110 by 26 feet, and two separation wards of two beds each, with a cubic air space of 1500 feet for each patient. In the middle of the large wards on the north side a sanitary tower has been constructed containing toilet accommodations disconnected from the ward by a cross ventilated lobby. In the administration portion of the ward there is a dressing room where minor operations may be performed without moving the patients to the surgical pavilion; a diet kitchen with dining room attached, a laboratory, linen room, toilets and a large solarium being provided for each ward. An elevator capable of carrying a bed and four attendants is in operation in each ward building. A large porch on the south side of the first floor of all wards permits patients being wheeled into the air and sunlight. The roof of the main connecting corridor is also available for the same purpose.

II.

Receiving Building.

The Receiving building, which is used as an emergency and surgical pavilion, is located on the north end of the site. Between it and the administration building are the two surgical ward buildings, each four stories high; while to the rear, but centrally located and connected with the main corridor, is the main service building. There are two medical ward pavilions, also four stories high, to the east of the Administration and Service buildings and to the south of these is the Nurses' Home.

The Receiving building serves a fourfold purpose: to receive patients entering the hospital proper; for use as an emergency hospital; for the treatment of minor cases; and as an entrance for students from the medical schools. On the first floor the wards are so arranged as to accommodate thirty-five detention cases and the second floor is devoted to surgical operations and surgical cases, having two amphitheatres, each furnished for seventy-five persons. An amphitheater, sufficiently large to accommodate 200 persons, is located on the third floor and is used for clinical purposes. In the basement is located a fully-equipped hydrotherapeutic department.

III.

Administration Building.

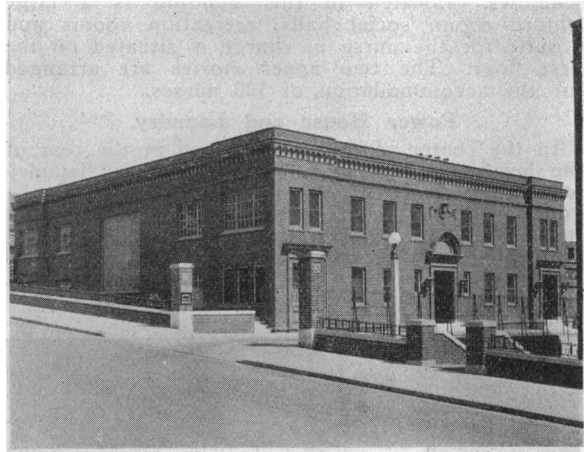
The Administration building is three stories high. Offices for the Superintendent, Medical Corps, etc., and a reception room occupy the first floor. The two upper stories are devoted to the use of the medical staff and internes and contain a library and recreation room.

In the rear of the Administration building the main service building is located, at the center of the main corridor where it is easy of access from the other structures. It contains a large kitchen, a serving pantry from which all food is distributed to the wards, there being secondary serving pantries between the middle staff dining-room and nurses' dining-room and the male and female dining-rooms. The drug and linen storerooms are also located in this building, the two upper floors of which are devoted to the use of the help as quarters. In the basement is a general store room, bake oven and a separate apartment for storage of clothing of patients.

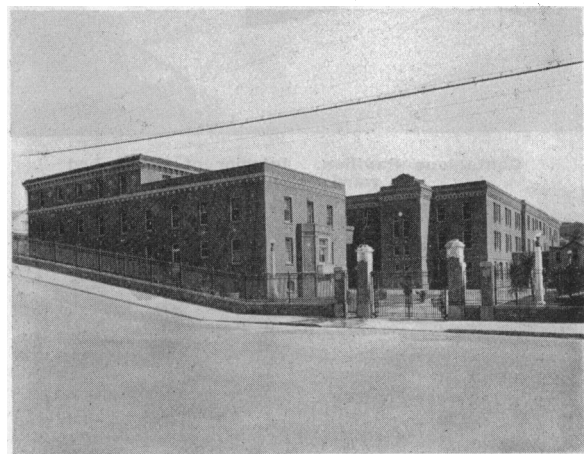
IV.

Nurses' Home.

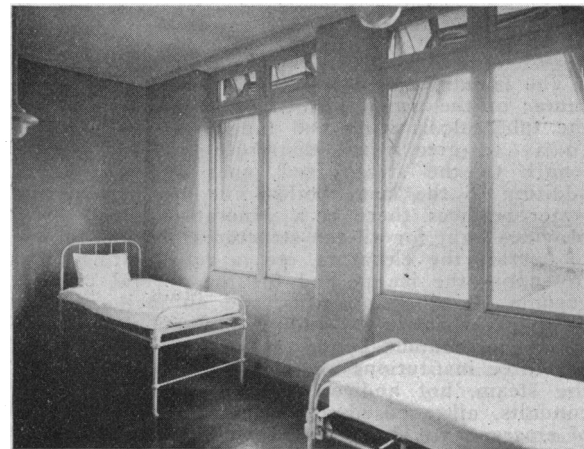
The Nurses' Home is situated at the extreme southern end of the main corridor with a garden facing the south where the attendants may enjoy themselves and be free from view of the ward



View of Pathological Building



Contagious Pavilion—with Nurses' Home in foreground

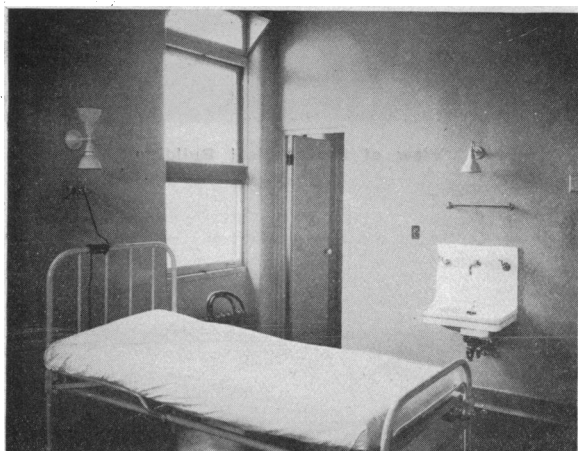


Contagious Pavilion. Interior of an open-air or sun ward

windows. Located in this building is a large lecture room, social halls, recreation rooms and a suite for the nurse in charge is situated on the first floor. The two upper stories are arranged for the accommodation of 120 nurses.

Power House and Laundry.

In the center of the grounds and at the rear of the Service building the power house and laundry is located, while to the north and close to the emergency pavilion are located the garages for the use of the various ambulances. The morgue is located on the first floor of the Pathological building, and so arranged that a view of its entrance is impossible from the other buildings.



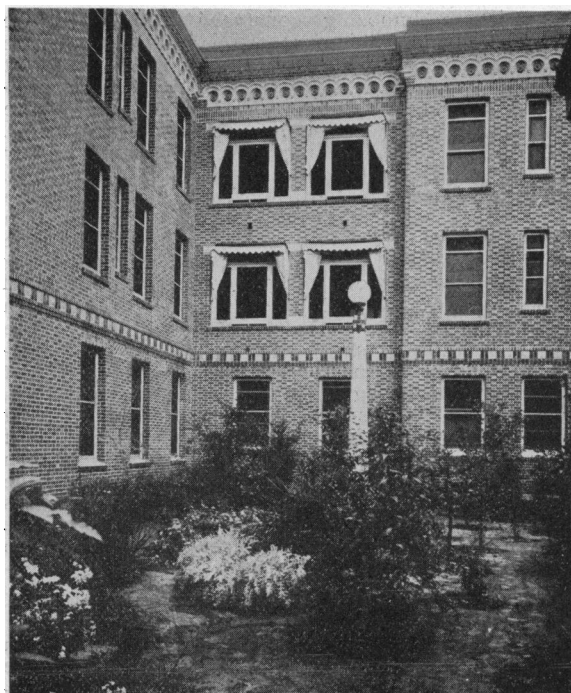
Contagious Pavilion. Interior of single bed ward (cubicle)



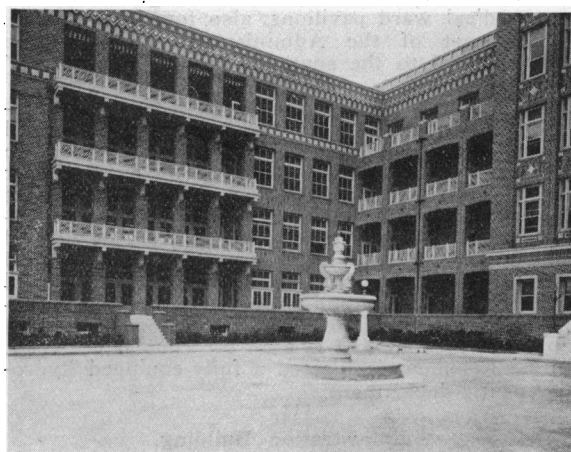
Tuberculosis Wing—General View.

V.

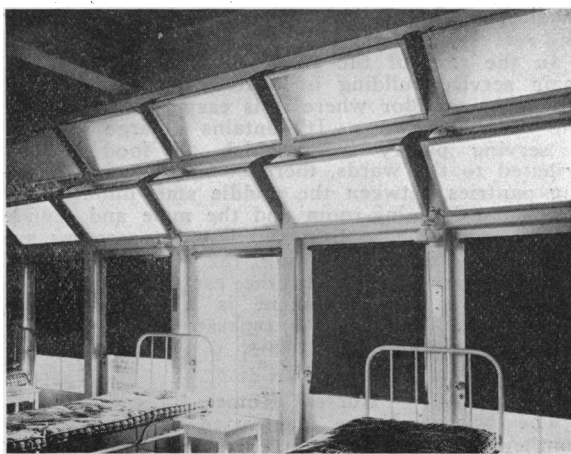
The laundry and power house are located in the center of the group formed by the main hospital, the tuberculosis wing and the contagious pavilion so as to give equal distribution and minimum length to the steam feed pipes and mains. In addition to the large boilers for heating and hot water services there is a generating plant which provides light for all the structures and also power to operate the elevators, etc., a refrigerating plant to supply the ice needed for the several units, a vacuum cleaning apparatus, and an incinerator to destroy garbage, old bedding and old clothing. A system of tunnels connects the power plant with the three institutions and in these tunnels are run the steam, hot and cold water mains and other conduits, all exposed and easy of access in case of emergency. These tunnels are also used for the removal of bodies from any of the wards to the morgue.



Contagious Pavilion—Open-air wards.



Tuberculosis Wing—Showing Sun-porches.



Tuberculosis Wing. Open-air ward for bed cases.

VI.

The morgue is provided with two autopsy rooms and a demonstration room which will accommodate between 75 and 100 students. The laboratories of the Board of Health and a pathological room are situated on the upper floor, the roof of the building being arranged to accommodate the various animals used in experimental and research work.

VII.

Communicable Disease Wing.

The communicable disease wing or group consists of a three-story U-shaped ward building with the court facing south. On the first floor, connected to the building proper by covered corridors, is the administration unit. The northern unit of this wing, and connected to the main ward building by a covered passage, is located the residence quarters for the medical staff and the nurses' dormitories. The ward units are distributed in the two wings of the U, each floor being divided into two divisions with the service in the center, such as diet kitchen, utility room, laboratory, bath room, linen room, etc. In the heel of the U to the north on the second floor, is the operating suite. This building is especially designed to give isolation to the individual patient by the so-called cubicle. But at the same time, all the advantages of the large ward treatment are obtained by means of glass partitions and wire screening. Each element of service is so arranged and placed as to carry out the rigid regime which is required in an institution of this sort. The associated architects of this building were John Reid, Jr., and Frederick H. Meyer.

The kitchen and dining rooms for the administration are placed on the first floor and connected with the main hospital group by a special tunnel. The contagious group has a special entrance for visitors and patients, opening on to the central driveway of the main group and jealously guarded against the casual visitor.

XII.

Tuberculosis Group.

The group of buildings for the tubercular patients is generally known as the S. E. Wing of the San Francisco Hospital and is situated to the southeast of the General Hospital upon a lot having a frontage of 376 feet on 23rd street by 465 on Vermont street. An alleyway 20 feet wide separates the grounds of this group from the General Hospital grounds, while at the north line its grounds or garden adjoin that of the northeast wing. The architect was Mr. Hermann Barth.

The group of buildings for the tubercular patients is placed practically in the center of the lot, with the main facade facing toward the south on 23rd street. It consists of several buildings, semi-detached by means of air-cut-offs, which are short passages provided with windows on both sides, enabling a complete isolation of the several buildings from one another as far as air is concerned, at the same time providing direct communication from one building to the other on all the floors.

A covered passageway connects this group of buildings with the Administration building of the General Hospital.

XIII.

The several buildings are grouped around an axis running north and south, the main building, five stories in height, forms the head of the composition, flanked by two four-story pavilions, which, with the main building, surround on three sides the main court of the building, leaving the main court open toward the south and approach.

The pavilion to the west of the central structure houses the male incipient patients, the pavilion to the east the male advanced patients. The Women's

building is located along the main axis and forms the north end of the composition; it is two stories in height, arranged to receive an additional story in the future.

The Administration building, three stories high, is also placed on the main axis between the main building (or building for males) and the Women's building, thus completely separating the male from the female patients. A like separation of sexes is strictly carried out in the layout and design of the garden and grounds.

The Administration building contains the general office, waiting room, doctors' offices, doctor's bedroom with bath, head nurse's bedroom with bath, and internes' bedrooms with bath.

A high basement extends under all the structures.

The wards and accessories are arranged in ten units, each unit provides for 25 patients, of which eight units are given to the male patients and two units to the female patients. The four units for male incipient patients contain each:

XIV.

One open ward of ten beds.

One closed ward of five beds.

One closed ward of four beds.

One closed ward of two beds.

Four closed wards of one bed.

The four units for male advanced patients each contain:

One closed ward of four beds.

Two closed wards for three beds.

Three closed wards for two beds.

Nine closed wards for one bed.

The two units in the Women's building contain the following:

XV.

Incipient Patients:

One open ward for ten beds.

Two closed wards for four beds.

Seven closed wards for one bed.

Advanced Patients:

Two wards for three beds.

Six wards for two beds.

Seven wards for one bed.

Each unit throughout is provided with a diet kitchen, surgical dressing room, examining room, linen room, apparatus room, utility room, lavatories, toilets and bath for patients, and lavatory and toilet for nurses, janitors' closet, also a large sun room.

Open terraces and porches are of ample capacity and planned so as not to take away the sun and light to the rooms.

The window area for each ward is of such size, that by opening them each ward becomes practically an open ward.

Large and separate roof gardens are provided for the male and female patients, to which are joined rest rooms and solariums, toilets, etc.

The electric elevators are automatic push-button machines, two of which serve the main building, one serves the Women's building, and one is planned for the Administration building, all connecting with basement, each story and the roof garden.

In the matter of heating, ventilation and lighting, nurses' call system, etc., the most up-to-date approved systems have been installed.

All buildings are of fireproof construction with steel frame, concrete floors, terra cotta partitions, exterior brick walls with terra cotta trimmings.

The architectural style is a free adaptation of the Italian Renaissance and harmonizes with the architectural treatment of the General Hospital group.

The aim in planning was to group the several parts so as to admit of easy administration with a maximum of economy in both cost of structure and maintenance, with due regard to convenience and comfort to patients and attendants.